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Bib Data Sheet

CONFIRMATION NO. 7396

|                                    |                                                           |                     |                               |                                            |
|------------------------------------|-----------------------------------------------------------|---------------------|-------------------------------|--------------------------------------------|
| <b>SERIAL NUMBER</b><br>10/686,880 | <b>FILING OR 371(c) DATE</b><br>10/16/2003<br><b>RULE</b> | <b>CLASS</b><br>514 | <b>GROUP ART UNIT</b><br>1617 | <b>ATTORNEY DOCKET NO.</b><br>41957-102729 |
|------------------------------------|-----------------------------------------------------------|---------------------|-------------------------------|--------------------------------------------|

## APPLICANTS

Joel E. Bernstein, Deerfield, IL;

\*\* CONTINUING DATA \*\*\*\*\*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

\*\* 01/22/2004

|                                                             |                                                                                                                                                                    |                               |                            |                          |                                |
|-------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|----------------------------|--------------------------|--------------------------------|
| Foreign Priority claimed<br>35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br><input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after | <b>STATE OR COUNTRY</b><br>IL | <b>SHEETS DRAWING</b><br>0 | <b>TOTAL CLAIMS</b><br>3 | <b>INDEPENDENT CLAIMS</b><br>1 |
| Verified and Acknowledged                                   | Allowance<br>Examiner's Signature <i>[Signature]</i> Initials <i>UE</i>                                                                                            |                               |                            |                          |                                |

## ADDRESS

23644

## TITLE

Method for providing long-lasting pain relief through intrathecal administration of civamide

|                                   |                                                                                                             |                                                                                                                                                                                                                                                                                 |
|-----------------------------------|-------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>FILING FEE RECEIVED</b><br>385 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
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